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FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Person Making the Disbursements/Obligatio	ns	
(a) Name CAROLINA RISIN	G INC.	
(b) Address (number and street) check if different t 5 WEST HARGETT STREET - SUITE 502	han previously reported	2. FEC Identification Number
(c) City, State and ZIP Code RALEIGH	NC 27601	C C30002273
(d) Name of Employer or Principal Place of Business	(e) Occupatio	n
New 3. Is This Statement or Amended	4. Covering Period	/ 12 / 2014 through
5. (a) Date of Public Distribution(s) 09 12 2014 (b) Communication Title NC TV and CABLE		
7. If the filer is an individual, unincorporated of were the disbursements made exclusively formula. Custodian of Records (a) Name		
Dallas H Woodhouse (b) Address (number and street) 5 West Hargett Street - Suite 502		
(c) City, State and ZIP Code Raleigh (d) Name of Employer or Principal Place of Business	NC 2760° (e) Occupatio	
Carolina Rising	Presider	nt
9. Total Donations This Statement		.00
0. Total Disbursements/Obligations This State	ment	457853.11
Under penalty of perjury, I certify that this statement is		
Dallas H Woodhouse SIGNATURE	[Electronically Filed] DATE	09/17/2014

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this statement to the penalties of 2 U.S.C. §437g.